

FACT SHEET

Choice Considerations Relevant to the Use of Enteral Nutrition

BQIS Fact Sheets provide a general overview on topics important to supporting an individual's health and safety and to improving their quality of life. This document provides general information on the topic and is not intended to replace team assessment, decision making or medical advice. This is the tenth of ten Fact Sheets regarding aspiration prevention.

Intended Outcomes

Interdisciplinary teams, families, and individuals will gain a better understanding of issues that revolve around the decision to replace oral intake with enteral nutrition.

Definitions

Enteral Nutrition: A way to provide nutrition and hydration through a tube placed in the nose, stomach, or small intestine instead of eating food by mouth.

Facts

- Making an individualized decision regarding enteral nutrition:
 - Choosing enteral nutrition over oral intake is an individual issue that must be carefully considered and discussed by the individual, their family, guardian, medical team, and other members of the interdisciplinary team.
 - Consideration must be given to the individual and guardian's wishes.
 - In order to make a decision, everyone involved needs a clear understanding of all the facts surrounding the individual's situation, the risks and benefits of all alternatives, and both short- and long-term implications of each alternative.
 - Health and medical-related questions specific to the individual can best be addressed by the individual's physician.
- Benefits of tube feedings may be an improved or steady:
 - Physical health: improved weight, hydration and nutrition, stronger and healthier skin, muscle and bone, maintain chemical balance
 - Mental health: more alert and energized
 - Quality of life: more alert and energized, increased socialization, and an increased feeling of well-being

Note: This list of benefits is not intended to be all-inclusive.



FACT SHEET

- Possible risks of tube feedings may include:
 - Choking/aspirating on fluids
 - Cramps and diarrhea
 - Irritation and infection from the tube
 - Being seen by others as sick or fragile
 - Tube migrating from where it was inserted
 - Chemical imbalances in blood, i.e. electrolytes (lab results sodium, potassium, and chloride levels)
 - Hydration concerns: either too little free water and fluid causing dehydration, or too much free water and fluid causing over-hydration
 - Certain conditions may worsen without close monitoring, such as congestive heart failure or diabetes mellitus

Note: This list of risks is not intended to be all-inclusive.

Recommended Actions and Prevention Strategies

- 1. Consult primary physician along with the rest of the interdisciplinary team with any questions and concerns.
- 2. Give careful consideration to all options, benefits, and risks.
- 3. Be supportive of the individual and/or the guardian in their decision.



FACT SHEET

Learning Assessment

The following questions can be used to verify a person's competency regarding the material contained in this Fact Sheet:

- 1. Who might best address health concerns related to making a decision on oral intake verses enteral intake?
 - A. The guardian
 - B. The physician
 - C. The interdisciplinary team
 - D. The dietitian
- 2. Receiving nutrition through a tube could improve an individual's:
 - A. Physical health
 - B. Mental health
 - C. Quality of life
 - D. All of the above
- 3. Possible risks of receiving nutrition through a tube could include:
 - A. Choking on fluids
 - B. Tube moving from where it was inserted
 - C. Development of seizures
 - D. All of the above
 - E. A and B



FACT SHEET

References

Enteral and parenteral nutrition. American College of Gastroenterology. Retrieved 07/20/2015 from http://patients.gi.org/topics/enteral-and-parenteral-nutrition/.

Gavi, S., Hensley, J., Cervo, F. Nicastri, C. & Fields, S. (2008). Management of feeding tube complications in the long-term care resident. Annals of Long-Term Care, 16 (4). Retrieved 07/20/2015 from http://www.annalsoflongtermcare.com/article/8614.

Parrish, C. R. (2003). Aspiration risk and enteral feeding: A clinical approach. Practical Gastroenterology, 89-96. Retrieved 07/20/2015 from http://www.medicine.virginia.edu/clinical/departments/medicine/divisions/digestive-health/nutrition-support-team/nutrition-articles/copy_of_apr03opillaarticle.pdf.

Related Resources

Aspiration Prevention Series Fact Sheets: Food Texture and Fluid Consistency Modification, Management of Constipation, Management of Oral Health, Dysphagia, Modified Barium Swallow Study/ Videofluoroscopy, Management of Gastroesophageal Reflux Disease (GERD), Positioning, Management of Residuals, and Feeding Tubes and Feeding/Medication Administration Options

Learning Assessment Answers

- 1. B
- 2. D
- 3. F

Bureau of Quality Improvement Services BQISHelp@FSSA.IN.gov

Choice Considerations Relevant to the Use of Eternal Nutrition
HS_AP_Choice (12/15/2009)
Revised 07/20/2015

4